

# 2006 TRAC Summer Conference Application Form

Name: \_\_\_\_\_

Gender: \_\_\_\_\_ Age: \_\_\_\_\_ Ethnic Background (Optional): \_\_\_\_\_

Address: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_

Address (if different): \_\_\_\_\_

Telephone: (Home) \_\_\_\_\_ (Work) \_\_\_\_\_

Do you have any relatives that work for this department? If yes, give name and relationship

\_\_\_\_\_

Name of School (Fall 2006): \_\_\_\_\_

School Address: \_\_\_\_\_

Guidance Counselor: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

Student Grade Point Average (4.0 Scale): \_\_\_\_\_

During the 2006-2007 School Year I will be in the: (Check One)

\_\_\_\_\_ 8th Grade \_\_\_\_\_ 9th Grade \_\_\_\_\_ 10th Grade

Class History (Please check the appropriate boxes)

	Algebra	Geometry	Trigonometry	Physics	Writing	Speech
Already Taken						
Currently Taking						
Will Take						

Career Interests (Circle up to three)

Engineering    Technology    Construction    Transportation    Computer Science    Environmental Science  
Scientific Research    Business    Law    Journalism    Other: \_\_\_\_\_

Are you a TRAC participating student? Yes \_\_\_\_\_ No \_\_\_\_\_

If Yes, what's your teacher's name? \_\_\_\_\_

**Required Essay (Essay must be typed and cannot be more than one (1) page in length).**

Describe why you are interested in transportation, your career goals, and how the TRAC Summer Conference can assist you in reaching your goals.

Student Signature \_\_\_\_\_

If you have special needs addressed by the Americans with Disability Act, please notify David C. Williams by calling **1-877-605-1435**. If you are hearing or speech impaired, please contact the Missouri Relay System by calling **1-800-735-2966**.

**APPLICATION DEADLINE: JUNE 1, 2006. SUCCESFUL APPLICANTS WILL BE NOTIFIED BY JUNE 30, 2006.**

Please mail applications to: David C. Williams, Regional TRAC Director, 1320 Creek Trail Drive, P.O. Box 270, Jefferson City, MO 65109